

**MUNICIPALITY OF PENN HILLS**  
CODE ENFORCEMENT DEPARTMENT  
12245 FRANKSTOWN ROAD  
PENN HILLS , PA 15235  
OFFICE # (412)798-2132 / FAX # (412)798-2160  
**Fire Prevention Application Permit**

**Note: Please Print or Type This Application**

Application Date: \_\_\_\_\_

**Fee: \$50.00**

Applicant: \_\_\_\_\_ Phone No. \_\_\_\_\_

Address: \_\_\_\_\_

Owner: \_\_\_\_\_ Phone No. \_\_\_\_\_  
(if different then applicant)

Owner's Address: \_\_\_\_\_

THE ABOVE NAMED APPLICANT HEREBY MAKES APPLICATION TO CONDUCT THE FOLLOWING  
ACTIVITY AT THE LOCATION DESCRIBED BELOW:

Activity: \_\_\_\_\_  
\_\_\_\_\_

Location: \_\_\_\_\_

I hereby acknowledge that I have read this application, that the information given is correct, and that I am the owner, or duly authorized to act in the owner's behalf, and, as such, hereby agree to comply with the applicable requirements of the fire prevention code.

\_\_\_\_\_  
Applicant/Agent signature Date

Comments: \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Approved/Disapproved Yes \_\_\_\_\_ No \_\_\_\_\_

Reason for Disapproval: \_\_\_\_\_  
\_\_\_\_\_

\_\_\_\_\_  
Administrator's Signature Date: